

**CLAIMS ONLY**

Application Number

09/939151

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24	1					
25		1				
26		1				
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42	1					
43		1				
44		1				
45						
46						
47						
48						
49	1					
50		1				
Total Indep						
Total Depend						
Total Claims						

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
55						
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57						
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89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
Total Indep	4					
Total Depend	36					
Total Claims	40					